Statistical Bulletin

METROPOLITAN LIFE INSURANCE COMPANY

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Manpower for National Defense

THE present national emergency, precipitated by international events, has brought into sharp focus the needs of our armed forces and our industry for greatly increased manpower. In this connection, it is pertinent to review some of the recent population trends, as well as the indications for our future male population at the main military ages.

Preliminary results of the census taken in April of this year indicate that the population of the United States then was about 151,000,000, including the armed forces overseas. This means an increase of more than 19,000,000 since 1940, or of 14.6 percent. The detailed returns of the recent census are not yet available, so that we must be guided by the estimates covering the period up through 1949, shown in the table on page 2. The gains in population were not shared equally by all age groups. Relatively, the largest increases occurred at the young and at the more advanced ages. In contrast, the population at ages 10-19 declined appreciably.

It is noteworthy that about 9,000,000 persons were added to the population at ages 25-64 between 1940 and 1949. Since persons at these ages constitute the main source of industrial and agricultural manpower, our country is now in a better position than ever before to expand its productivity for defense without seriously impairing the economy. The increase in population at the main productive ages, however, has been greater for women than for men. Thus, it is likely that in the event of a protracted emergency, women will enter the labor force in greater numbers than during World War II.

What about the group of men at ages 18-25, who constitute the principal reservoir of our armed forces? Although their number is somewhat larger now than in 1940, the outlook for the immediate future is less favorable. As is evident from the chart on page 3, this group increased from about 9.3 million in 1940 to an all-time high of more than 9.6 million near the end of World War II. Since 1947, however, the number of males at ages 18-25 has been decreasing and will continue to drop for the next few years, but even so will total 8.7 million by 1956. This decline results from the marked fall in the birth rate in the late 1920's

POPULATION OF THE UNITED STATES BY SEX AND AGE, 1940 AND 1949

AGE	POPULATION (IN THOUSANDS)						PERCENT INCREASE 1949 SINCE 1940		
	TOTAL PERSONS		MALES		FEMALES				
	1949	1940	1949	1940	1949	1940	TOTAL PERSONS	MALES	FEMALES
ALL AGES	149,215	131,669	74,243	66,062	74,973	65,608	13.3	12.4	14.3
0- 4	15,805	10,542	8,069	5,355	7,737	5,187	49.9	50.7	49.2
5- 9	13,452	10,685	6,865	5,419	6,588	5,266	25.9	26.7	25.1
10-14	11,161	11,746	5,676	,952	5,485	5,794	— 5.0	— 4.6	— 5.3
15-19	10,751	12,334	5,440	6,180	5,311	6,153	—12.8	—12.0	—13.7
20-24	11,884	11,588	5,950	5,692	5,934	5,895	2.6	4.5	.7
25-29	12,156	11,097	5,974	5,451	6,182	5,646	9.5	9.6	9.5
30-34	11,348	10,242	5,50	5,070	5,844	5,172	10.8	8.6	13.0
35-39	10,843	9,545	5,307	4,746	5,536	4,800	13.6	11.8	15.3
40-44	9,912	8,788	4,892	4,419	5,020	4,369	12.8	10.7	14.9
45-49	9,093	8,255	4,495	4,209	4,598	4,046	10.2	6.8	13.6
50-54	8,155	7,257	4,050	3,753	4,105	3,504	12.4	7.9	17.2
55-59	7,341	5,868	3,659	3,025	3,682	2,843	25.1	21.0	29.5
60-64	6,042	4,760	3,017	2,413	3,026	2,347	26.9	25.0	28.9
65-69	4,471	3,748	2,190	1,869	2,281	1,879	19.3	17.2	21.4
70-74	3,211	2,561	1,524	1,265	1,686	1,296	25.4	20.5	30.1
75 and over	3,588	2,655	1,630	1,244	1,959	1,411	35.1	31.0	38.8

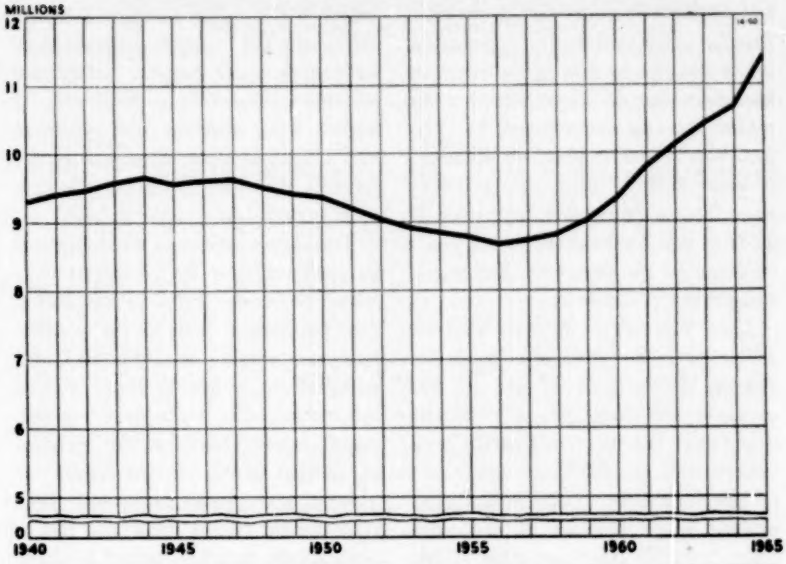
Minus (—) denotes decrease.
Source of basic data: Current Population Reports, Series P-25, No. 39, Bureau of the Census, May 1950. The figures for 1949 include the armed forces overseas.

and early 1930's. But after 1956, the number of men at the main military ages will begin to climb again, and will reach about 11.4 million in 1965; the indications are that the increase will continue even beyond that time.

In view of these facts, it is indeed fortunate that marked progress has been made over the years in conserving life in our country. Thanks to the remarkable advances in medical science and public health administration, the frequency of premature death has been significantly reduced among all components of the population. A measure of what this has meant in terms of military manpower is that about 160,000 of the men at ages 18-25 are now alive owing to the decline in mortality during their lifetime. This is a dividend of manpower available for the country's armed forces which probably exceeds the number of United Nations' forces now engaged in Korea.

The size of our country's future population will be determined largely by the level of the birth rate in the years to come. Already the remarkably high birth rates of the war and the immediate postwar period have made their imprint on our population structure. Thus, from 1940 to 1949 the population under age 5 increased by one half and at ages 5-9 by one fourth. Today, these children add to the number of our dependents, but they will soon become the bulwarks of our democracy.

Male Population at Ages 18 to 25, United States, 1940-1965



Continued Rise in Longevity of Industrial Population

THE expectation of life at birth reached a new high of 67.7 years in 1949 among the many millions of Industrial policyholders of the Metropolitan Life Insurance Company. This represents a gain of one-half year over the figure for 1948, and of fully five years over that for 1939. The recent improvement in longevity, as is evident from Table 1, is the continuation of a long-term trend. In 1879-1889, the earliest period for which data are available in this experience, the expectation of life at birth was about 34 years. Progress in reducing premature death since that time has been so marked that the average lifetime among the insured has been doubled. The steady rise in the longevity of American wage-earners and their families has undoubtedly been a material factor in placing our country in its preeminent position among the nations of the world.

Each of the color and sex groups among the insured shared in the increase in expectation of life between 1948 and 1949. The gains were slightly greater for females than for males. Thus, the expectation of life among white girls at age 5 increased one-half year, as against a rise of two fifths of a year among white boys at that age. Females have consistently done better than males in adding to their expectation of life. Within the past decade alone, the

gain among white females at age 5 has amounted to one year more than that for white males. In consequence, white females at this age now enjoy an advantage of 5.3 years over the males. Among the colored, the disparity in longevity between the sexes is appreciably smaller. Nevertheless, even in this group the difference in 1949 at age 5 amounted to 2.5 years in favor of the females. The details are shown in Table 2.

The mortality figures likewise tell a story of remarkable progress. Among white girls at age 10, for example, the death rate in 1949 was down to the extraordinarily low point of 0.3 per 1,000. A death rate of less than 1 per 1,000 is observed among white females in the ages from 3 to 27 years inclusive. This is about one half the rate recorded only a decade ago. Among white males the death rate has dropped below 1 per 1,000 at ages 3 to 16. Although the colored policyholders have also experienced a substantial decline in mortality, their rate is higher than that for the white at every age; at some ages among the females the death rate for the colored is more than twice as high.

The improvement in mortality and longevity during the past four decades has been greater in the industrial population than in the population as a whole. In 1911-1912, the expectation of life at birth among the Industrial policyholders was 6½ years below that for the general population of the United States; at present, the figures are equal. This achievement of the rank and file in our country has had broad implications and gives added meaning to the phrase, "the American way of life."

TABLE 1—EXPECTATION OF LIFE AT BIRTH. PREMIUM-PAYING BUSINESS*
INDUSTRIAL DEPARTMENT 1879-1889 TO 1949
METROPOLITAN LIFE INSURANCE COMPANY

CALENDAR YEAR	EXPECTATION IN YEARS	CALENDAR YEAR	EXPECTATION IN YEARS	CALENDAR YEAR	EXPECTATION IN YEARS
1949	67.72	1938	61.94	1927	56.42
1948	67.16	1937	60.71	1926	55.02
1947	66.50	1936	60.31	1925	55.51
1946†	65.57	1935	60.25	1924	55.62
1945†	64.95	1934	59.45	1923	54.55
1944†	64.40	1933	59.19	1922	55.04
1943†	63.86	1932	58.80	1921	55.08
1942†	64.26	1931	57.90	1919-1920	51.14
1941	63.42	1930	57.36	1911-1912	46.63
1940	62.93	1929	55.78	1879-1889	34.00
1939	62.50	1928	55.88		

Gain, 1949 since 1911-1912, 21.09 years; since 1879-1889, 33.72 years.

*The figures for 1948 and 1949 relate to the total Industrial Department—Weekly and Monthly Premium-Paying business combined; prior to 1948 the figures pertain to the Weekly business alone. The expectation of life at birth for the total is about two fifths of a year greater than that for the Weekly Premium-Paying business.

†The figures for the years 1942-1946 exclude military and civilian deaths from enemy action.

TABLE 2—EXPECTATION OF LIFE AND MORTALITY RATE PER 1,000 AT SPECIFIED AGE, BY COLOR AND SEX. TOTAL PREMIUM-PAYING BUSINESS, INDUSTRIAL DEPARTMENT, 1949 METROPOLITAN LIFE INSURANCE COMPANY

AGE	EXPECTATION OF LIFE					MORTALITY RATE PER 1,000				
	TOTAL PERSONS	WHITE		COLORED		TOTAL PERSONS	WHITE		COLORED	
		MALES	FEMALES	MALES	FEMALES		MALES	FEMALES	MALES	FEMALES
5	65.33	62.76	68.10	60.20	62.66	.69	.73	.59	*1.30	.83
10	60.50	57.95	63.25	55.45	57.83	.45	.56	.33	.62	.34
15	55.65	53.13	58.36	50.68	52.98	.71	.88	.44	1.52	1.05
20	50.88	48.40	53.50	46.17	48.36	1.10	1.33	.63	2.53	2.07
25	46.18	43.73	48.69	41.74	43.89	1.31	1.54	.84	2.57	2.56
30	41.48	39.06	43.90	37.27	39.43	1.53	1.69	1.12	3.10	2.70
35	36.82	34.42	39.17	32.91	35.00	2.28	2.55	1.63	4.59	3.88
40	32.30	29.94	34.53	28.74	30.78	3.66	4.50	2.41	6.77	6.11
45	27.97	25.71	29.99	24.80	26.80	5.78	7.45	3.80	10.00	8.74
50	23.86	21.77	25.63	21.14	23.03	8.63	11.49	5.96	14.42	11.63
55	19.97	18.15	21.47	17.76	19.44	13.03	17.81	9.31	20.25	16.20
60	16.38	14.90	17.56	14.68	16.13	19.70	26.54	14.56	29.62	23.92
65	13.11	11.97	13.97	12.03	13.19	29.65	37.36	23.90	43.28	34.57
70	10.16	9.31	10.79	9.74	10.61	44.58	54.36	38.76	57.78	49.56

School-Age Population to Rise for Another Decade

IT IS now evident that the increase in elementary and high school enrollments will be greater and will continue for a longer period than was forecast only a short time ago. This new development is a consequence of the record high level of births throughout the postwar years. The population at ages 5-17 can be expected to rise by more than one third in the next decade. The peak for school enrollments actually will be reached several years after 1960 —around 1964 according to present indications — when there may be somewhat more than 44 million children at the school ages, 12.7 million more than at present.

Although the elementary schools have already experienced an increase in new enrollments owing to the wartime boom in births, the rise will be even sharper in the years ahead as the postwar babies reach school age. Moreover, in each year of the next decade the number of beginners will exceed the number who are graduated from the elementary schools, with the result that the elementary school population as a whole will increase considerably. The accompanying table shows that enrollments will rise rapidly through 1956, by which year children at ages 5-13 will have increased 28 percent over the present figure of 23 million. Their numbers will rise further in the later years of the decade, but at a slower rate. For children at the high school ages, that is 14-17, the situation is just the other way about —the relative gains will be greater

in the latter part of the decade. At these ages, the number is expected to rise from 8.5 million at present to about 9.8 million in 1956, and further to 11.5 million by 1960.

The trend of the elementary school-age population after 1960 will depend, of course, on the number of children born in our country in the years to come. Forecasts of future births are not attempted here, but if one assumes that the number will fall off by 50,000 in each year of the next 10 years—approximately the current pattern—enrollments in the elementary schools will not decline appreciably from their maximum in 1960. In other words, it is likely that the elementary school population in the 1960's will remain far above the present level. The trend for the secondary school population can be traced with greater certainty, as it is based upon children already born. This group will grow without interruption to a peak of about 14.4 million by 1964, an expected increase of fully two thirds in a period of only 14 years.

School enrollments will rise in every section of the country, but the increase will be especially marked in regions where there has been a large influx of population, such as the Pacific States. The same situation exists in suburban areas, which have a particular attraction for families with young children. At present, communities throughout the country are confronted primarily with the problem in elementary schools, but before long they will be faced also with a rising tide of enrollments in the high schools.

It is clear that if the school needs of our children are to be met, educational facilities and personnel will have to be expanded substantially in

FORECAST OF SCHOOL-AGE POPULATION IN THE UNITED STATES, 1950-1965

YEAR	NUMBER (IN MILLIONS)			PERCENTAGE INCREASE OVER 1950		
	AGES 5-17	AGES 5-13	AGES 14-17	AGES 5-17	AGES 5-13	AGES 14-17
1950	31.6	23.1	8.5			
1951	32.2	23.7	8.6	2	3	1
1952	34.0	25.2	8.8	8	9	4
1953	35.4	26.4	9.0	12	14	6
1954	36.8	27.7	9.1	16	20	7
1955	38.1	28.7	9.4	21	24	11
1956	39.3	29.6	9.8	24	28	15
1957	40.5	29.9	10.5	28	29	24
1958	41.5	30.5	11.1	31	32	31
1959	42.4	31.0	11.4	34	34	34
1960	43.1	31.6	11.5	36	37	35
1961			12.3			45
1962			12.9			52
1963			13.7			61
1964			14.4			69
1965			14.1			66

the course of the next decade. Although school construction is now under way in many parts of the country, these new buildings will provide only a fraction of the space needed to accommodate the coming bulge in the school population. There is also a pressing need for adequately trained teachers, particularly in the elementary schools. The solution to these problems is vital to the welfare of the country, inasmuch as our educational system is one of the foundation stones of our social order.

Accident Toll High Among Females

ACCIDENTS are far more important as a cause of death among females than is generally realized. Each year approximately 30,000 girls and women are killed by accidental injuries, a greater number than die from any other cause except the cardiovascular-renal diseases and cancer. Accidents are among the leading causes of death for females at every age period and are the greatest single menace to life in childhood and adolescence.

The principal types of fatal accidents among white females are shown in the table on page 8. Falls clearly outrank every other mishap at all ages combined, accounting for 45 percent of the total fatality from accidents in 1946-1947. The predominance of falls stems very largely from the high toll of life they exact at the older ages. Seven out of every eight deaths from this cause among white females occur at ages 65 and over. At these later ages falls are responsible for three quarters of all accident fatalities. Impaired vision and hearing, weakened skeletal muscles, and other physical deterioration make the aged prone to falls. Moreover, accidents of this kind, which ordinarily cause little disability at the younger ages, often result in serious injury or death in older people.

At the ages under 65, however, motor vehicles far outrank the other causes of accidental death. Among girls 15 to 19 years, motor vehicle fatalities accounted for practically two thirds of the mortality from all accidents in 1946-1947; at ages 20 to 44, the proportion was more than one half. Even in the advanced ages motor vehicles ranked second only to falls as a cause of accidental death.

Falls and motor vehicle fatalities obviously dominate the accident picture among white females, the two together being responsible for 70 percent of the total. Yet, there are other types of accidents which claim many lives each year. Burns and scalds, for example, are among the first three causes of accidental death at every age period among white females, and at ages 1 to 14 comprise 15 percent of the total accident mortality. These fatalities arise out of a variety of circumstances. Among preschool girls, scalds caused by upsetting or falling into hot liquids play a large role; at the school ages, burns that result from playing with matches and the hazard of clothing

catching fire from an open flame are the major factors. Beyond childhood, the mortality from burns and scalds reflects the special hazards to which housewives are exposed while working around the kitchen or in the laundry.

Conflagration accounted for slightly more than 3 percent of all deaths from accidents among white females in the aggregate, but for 10 percent of the total among girls 1 to 14 years of age. The other types of accidents appearing in the table need but be mentioned; they are drownings, absorption of poisonous gas, and poisoning by solids or liquids.

Accident prevention is a fertile

MORTALITY FROM LEADING TYPES OF ACCIDENTS AMONG WHITE FEMALES IN SPECIFIED AGE GROUPS. UNITED STATES, 1946-1947

TYPE OF ACCIDENT	Death Rate per 100,000	Percent of Total
ALL AGES		
TOTAL	42.9	100
Falls	19.1	45
Motor vehicle	10.6	25
Burns*	2.6	6
Conflagration	1.3	3
Drowning	1.1	3
AGES 1—14 YEARS		
TOTAL	21.2	100
Motor vehicle	8.0	38
Burns*	3.2	15
Drowning	2.4	11
Conflagration	2.1	10
Poisoning, solids or liquids	0.9	4
AGES 15—19 YEARS		
TOTAL	22.2	100
Motor vehicle	14.5	65
Drowning	1.5	7
Burns*	0.8	4
Conflagration	0.8	4
Poisonous gas	0.7	3
AGES 20—44 YEARS		
TOTAL	15.9	100
Motor vehicle	8.4	53
Burns*	1.3	8
Falls	1.0	6
Poisoning, solids or liquids	0.8	5
Conflagration	0.8	5
AGES 45—64 YEARS		
TOTAL	27.9	100
Motor vehicle	11.6	42
Falls	7.4	27
Burns*	2.1	8
Poisonous gas	1.0	4
Poisoning, solids or liquids	0.9	3
AGES 65 & OVER		
TOTAL	281.7	100
Falls	210.1	75
Motor vehicle	23.4	8
Burns*	9.6	3
Poisonous gas	4.0	1
Conflagration	2.9	1

*Excluding conflagration.

Source of basic data: Reports by the National Office of Vital Statistics.

NOTE—Data are not shown separately for children under 1 year of age, inasmuch as a large proportion of the accidental deaths at this age are reported as due to mechanical suffocation. Many of the deaths so reported, however, are probably caused by unrecognized respiratory infection.

field for life conservation and should be given greater emphasis in the health education program. There is particular need to stress safety in the home, where most of the mishaps among women occur. It is encouraging that in recent years some State health departments have taken leadership in home safety campaigns, but much more can be done by official agencies, State and local. During the present boom in construction, architects, builders, and engineers should make every effort to build safety into the home. Manufacturers of home appliances and other equipment can aid by improving further the safety of their products.

Decrease in Homicide

THE homicide rate is now less than half what it was about two decades ago among the Industrial policyholders of the Metropolitan Life Insurance Company. The rate at ages 1-74 years decreased steadily from 6.8 per 100,000 in 1931 to a low of 2.6 in 1944; a rise in the immediate postwar period brought the rate to 3.5 in 1947, but by 1949 it was almost back to the 1944 level. It is noteworthy that homicides decreased in frequency during the depression years, when unemployment and economic stringency were widespread—conditions which ordinarily breed crime. The temporary increase in homicide just after the war may be accounted for, in part at least, by the availability of arms to large numbers of men who had brought them home as war trophies.

Each of the color-sex groups in this insurance experience shared in the reduction in the homicide rate, as is evident from the table below. Males showed a somewhat greater decline than females. In each sex, white policyholders recorded a larger reduction than the colored, thus widening further the difference in rates between the two races. Currently, the figure for the colored is more than 8 times that for the white. Virtually every age period recorded a decrease in the homicide rate between 1931-1933 and 1948-1949; among the colored, the largest declines are observed at the ages where the rates are highest.

One can only speculate on the forces which have operated to reduce the homicide rate in the past two decades. It is likely that the clearance of slum areas, the general rise in the level of education, and the improved facilities for dealing with problem children and delinquents have contributed toward curbing anti-social behavior. But probably much more effective has been stricter law enforcement. The general tightening up of restrictions on the sale of firearms apparently has had a salutary effect. In this insurance experience, the proportion of homicides by shooting among white policyholders dropped from 64 percent in 1931-1933 to 49 percent in 1948-1949; among the colored the corresponding decline was from 66 to 57 percent.

Homicide is responsible for the loss of about 8,500 lives a year in the general population of the United States. More than one half of these victims even now are killed by firearms. Prohibiting the sale of guns so far as possible, limiting strictly the number of permits given, and penalizing severely persons found carrying firearms without a permit would undoubtedly be effective in further reducing the number of murders. So long as we tolerate the traffic in firearms we shall pay the price in a high incidence of homicide and of other criminal activities.

HOMICIDE RATES BY COLOR, SEX, AND AGE
METROPOLITAN LIFE INSURANCE COMPANY, WEEKLY PREMIUM-PAYING BUSINESS
1931-1949

AGE PERIOD (YEARS)	DEATH RATES PER 100,000				PERCENT DECLINE 1948-1949 SINCE 1931-1933	
	1948-1949	1931-1933	1948-1949	1931-1933	MALES	FEMALES
	WHITE MALES		WHITE FEMALES		WHITE	
1-74*	2.9	6.8	0.9	1.7	57	47
15-19	2.1	3.6	0.8	1.6	42	50
20-24	3.1	10.2	1.0	3.2	70	69
25-34	3.2	13.2	1.2	2.7	76	56
35-44	6.6	10.3	1.6	2.3	36	30
45-74*	4.4	8.7	1.1	1.4	49	21
	COLORED MALES		COLORED FEMALES		COLORED	
1-74*	24.7	49.2	7.6	12.0	50	37
15-19	20.8	42.6	6.7	11.9	51	44
20-24	44.5	94.7	14.0	25.1	53	44
25-34	47.3	104.8	14.7	27.9	55	47
35-44	43.7	83.9	13.6	16.3	48	17
45-74*	21.1	34.5	6.3	5.7	39	+11

*Standardized for age.
Plus (+) indicates increase.

DEATH RATES* PER 100,000 POLICYHOLDERS FROM SELECTED CAUSES ACCORDING TO THE SIXTH AND THE FIFTH REVISIONS OF THE INTERNATIONAL LIST

INDUSTRIAL PREMIUM-PAYING BUSINESS—*Weekly and Monthly Combined*
METROPOLITAN LIFE INSURANCE COMPANY

July 1950

INTERNATIONAL LIST NUMBER (6TH REVISION)	CAUSE OF DEATH	ANNUAL RATE* PER 100,000 POLICYHOLDERS					
		6th Revision		5th Revision			
		July	Jan.-July	July		Jan.-July	
		1950	1950	1950	1949	1950	1949
	ALL CAUSES—TOTAL	598.0	659.0	598.0	621.0	659.0	664.6
1-19	Tuberculosis (all forms)	19.4	21.7	19.9	24.8	22.5	25.6
1- 8	Tuberculosis of respiratory system	17.7	19.7	18.1	22.0	20.5	23.3
20-29	Syphilis	3.8	4.1	4.9	4.6	5.3	5.8
50,55-56,85	Communicable diseases of childhood	.6	.7	.7	.8	.8	1.2
80	Acute poliomyelitis	.4	.3	.3	1.3	.3	.3
140-205	Malignant neoplasms	119.1	119.2	122.1	117.4	123.1	120.2
260	Diabetes mellitus	14.7	15.1	24.2	24.4	27.5	25.8
[330-334,410-450,590-594]	Diseases of the cardiovascular-renal system	296.6	341.6	283.3	301.9	327.1	330.0
330-334	Vascular lesions, central nervous system	58.3	66.6	51.0	52.2	58.2	59.0
410-443	Diseases of heart	215.9	247.7	197.5	211.6	227.9	229.2
410-416	Chronic rheumatic heart disease	11.6	14.0	12.2	14.3	15.1	15.1
420-422	Arteriosclerotic and degenerative heart disease	155.6	177.0	†	†	†	†
440-443	Hypertension with heart disease	38.6	47.0	†	†	†	†
430-434	Other diseases of heart	10.1	9.7	†	†	†	†
444-447	Hypertension without mention of heart	5.7	7.1	.9	1.5	1.1	1.3
450	General arteriosclerosis	4.9	7.0	5.1	6.3	5.9	6.1
590-594	Nephritis and nephrosis	11.8	13.2	28.8	30.3	34.0	34.4
490-493	Pneumonia	10.1	17.6	10.8	12.4	18.4	20.6
480-483	Influenza	.3	2.6	.1	.5	2.0	1.8
540-542	Ulcers of stomach and duodenum	4.1	4.5	4.9	3.8	5.2	4.8
550-553	Appendicitis	1.5	1.7	1.8	2.0	1.9	2.2
560-561,570	Hernia and intestinal obstruction	4.8	4.3	5.3	4.5	4.5	4.8
543,571-572	Gastritis, duodenitis, enteritis, etc	2.6	2.9	2.1	2.5	2.3	2.6
581	Cirrhosis of liver	7.9	9.2	9.4	10.3	10.7	11.0
640-689	Complications of pregnancy, childbirth	1.3	1.7	1.3	2.3	1.8	2.3
E963,E970-E979	Suicide	7.8	7.0	7.8	6.5	7.0	7.2
E964,E980-E984	Homicide	2.7	2.8	2.7	2.3	2.8	2.8
[E800-E802,E810-E835,E840-E962]	Accidents—total	37.3	34.9	38.2	40.8	36.5	37.0
E810-E835	Motor vehicle	14.6	14.5	14.5	11.5	14.6	12.3
	Home	5.7	7.6	6.3	6.6	8.9	10.0
	Occupational	3.1	3.3	3.2	3.6	3.3	3.5
	All other causes	63.3	66.9	58.2	56.1	59.5	58.5

*The rates for 1950 are provisional.
†Not available separately.

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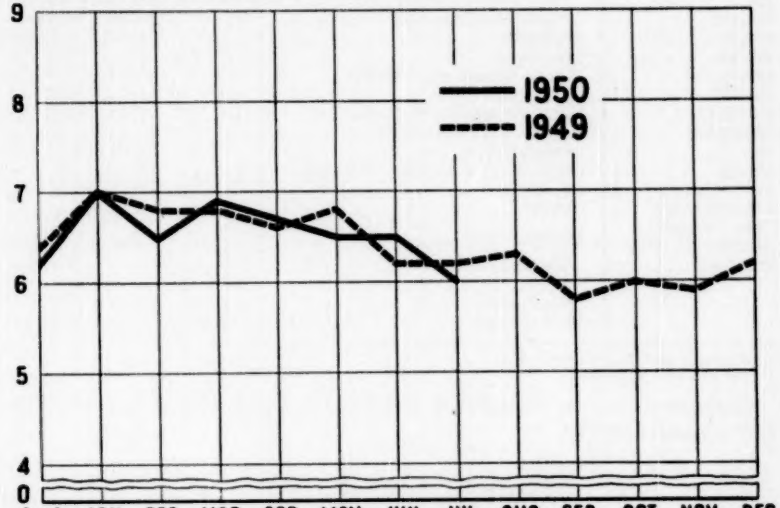
WEEKLY AND MONTHLY COMBINED

DEATH RATES PER 1,000 POLICYHOLDERS • ANNUAL BASIS



(DEC)	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1949	7.0	6.8	6.8	6.6	6.8	6.2	6.2	6.3	5.8	6.0	5.9	6.2
1950	7.0	6.5	6.9	6.7	6.5	6.5	6.0					

1950 Figures are provisional

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